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Country programme recommendation**

Guinea

Addendum

Summary

The present addendum to the country note submitted to the Executive Board at its first regular session of 2001 contains the final country programme recommendation for Board approval.

The Executive Director *recommends* that the Executive Board approve the amount of $11,966,000 from general resources, subject to the availability of funds, and $15,750,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the country programme for Guinea for the period 2002-2006.

* E/ICEF/2001/12.

** The original country note provided only indicative figures for estimated programme cooperation. The figures provided in the present addendum are final and take into account unspent balances of programme cooperation at the end of 2000. They will be contained in the "Summary of 2001 recommendations for general resources and supplementary funding programmes" (E/ICEF/2001/P/L.73).

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[1] Excerpted from the publication "Progress since the World Summit for Children: A statistical review", prepared as a supplement to the Secretary-General's report "We the children: End-decade review of the follow-up to the World Summit for Children" (A/S-27/3), and therefore may differ from data contained in the text of this document.

The situation of children and women

1. The situation of children and women differs in three respects from that described in the country note submitted to the Executive Board at its first regular session of 2001 (E/ICEF/2001/P/L.14): the sharp deterioration in subregional instability; the yellow fever epidemic; and, in economic terms, the fact that in December 2000 Guinea was declared eligible for the Heavily Indebted Poor Countries Debt Initiative.

2. For 10 years the country has been at the centre of an unstable subregional situation, which has brought a flow of approximately 800,000 refugees from Sierra Leone, Liberia and Guinea-Bissau, increasing the indigenous population by 10 per cent. While the refugees from Guinea-Bissau gradually returned home, those from Sierra Leone and Liberia remained until the crisis erupted in September 2000, following the armed incursions along the southern borders. Thousands of refugees and internally displaced persons, for the most part women and children, found themselves again on the roads, in the brush or taken in by families in the interior of the country. From January to March 2001 it was reckoned that there were almost 250,000 internally displaced persons and 200,000 refugees who were almost totally deprived of care, food and protection because their access to humanitarian aid was blocked.

3. The worsening of the crisis helped to increase the vulnerability of the 150,000 hosts, who had to contend with reduced access to the already inadequate basic social services. The crop and cattle losses experienced, either because the populations had no time for harvesting or because the crops and cattle were destroyed, eaten or taken away by the aggressors, led to a considerable shortfall in income for the affected families and caused the children to be threatened with malnutrition. This threat was made more acute by the loss of the normal means of subsistence, especially in the case of women. At the national level, it was noted that investments fell off, the defence budget increased by 20 per cent to the detriment of the social sectors, and environmental degradation was rapid. Many cases of violence (against women, in particular) and of enlistment of children and adolescents in the civil defence militia were observed.

4. The yellow fever epidemic which broke out at the same time, in September 2000, spread to most of the prefectures in Guinea. In all, 825 cases were reported in 20 of the 33 prefectures, with a fatality rate of 30 per cent. Because of Guinea's lack of resources and a dearth of vaccines on the international market, it proved impossible to mount an effective strategy to control the epidemic.

Programme cooperation, 1997-2001

5. To cope with the crisis, UNICEF promptly reviewed the regular 2001 plan of action, introduced an emergency plan of action and set up two field offices in order to be able to deal effectively with the needs of affected populations. UNICEF, in partnership with the United Nations High Commissioner for Refugees (UNHCR) and the non-governmental organizations (NGOs), supported the establishment or strengthening of services concerned with health, nutrition, water and sanitation access and protection in the prefectures of Forécariah, Kindia, Kissidougou, Faranah and Kankan, where most of the displaced were located. Thanks to this intervention,

which received funding from various donors, including the Government of Denmark, the Government of the United Kingdom and the UNICEF Committee of Japan, 2 million children were immunized against measles, 4,000 drinking-water points were treated, 40 wells and 2,000 latrines were constructed, and 70 temporary classrooms and 20 playgrounds were installed and equipped. The activities in question reduced the risk of epidemics and enabled 30,000 children to remain in school and develop an awareness of the culture of peace. Communication campaigns aimed at the authorities, security forces, educators, heads of refugee camps and communities were conducted with a view to instilling awareness of respect for rights and the need to combat violence. UNICEF backstopped the Ministry of Social Affairs and the NGOs in the work to strengthen the existing social and community services so as to be able to identify vulnerable groups, handle psychosocial disorder cases and reunite family members. Advocacy, training and various educational options were put in place in order to counter the enlistment of children in the militia. Assistance was provided to build the capacity of the national partners in the coordination of humanitarian aid.

6. All the resources approved by the Executive Board for the 1997-2001 cycle were mobilized. The mid-term review mentioned the encouraging results in the area of institutional support with the introduction of lower-cost replicable strategies, which the communities took over. It noted the weakness of national planning and the statistical systems, the fragmentation of activities, the persistence of divergencies between national texts, on the one hand, and the Conventions on the Rights of the Child and on the Elimination of All Forms of Discrimination against Women, on the other, and the difficulties encountered in applying the latter instruments.

7. UNICEF supported the Government's efforts to model its health policy on the Bamako Initiative, and this resulted in a rapid extension of primary health care (PHC) (every one of the 371 existing health centres is operating). It also contributed to the reduction of maternal mortality in two districts, where the efficacy of obstetric care was demonstrated and deaths were reduced from 12.2 per cent in 1996 to 2.2 per cent in 1999 for referred urgent cases, a result which encouraged other external partners to finance similar activities in 13 districts. The UNICEF/World Health Organization (WHO)/United States Agency for International Development/Rotary International partnership was instrumental in raising the anti-poliomyelitis immunization coverage rate to almost 100 per cent, leaving only those in hard-to-reach conflict areas to be immunized. With UNICEF support, the Government provided vitamin A supplementation to 90 per cent of the children, institutionalized community nutrition surveillance and reinforced growth monitoring in 200 health centres. Through the use of community monitoring and maintenance strategies at 35 per cent of the water points in Guinea, UNICEF demonstrated that community involvement can ensure a high rate of continuous functioning (96 per cent in the project). UNICEF played an active role in motivating the Joint United Nations Programme on HIV/AIDS and provided assistance in prevention activities for adolescents.

8. Where basic education is concerned, advocacy, technical assistance, surveying and support targeted to high-value-added activities, together with a better selection of themes for training the 3,000 educators and educational advisers, had a positive impact on school strategies, especially those targeting the enrolment of girls. These activities helped to raise the crude enrolment rate from 50 per cent in 1997 to 57 per cent in 2000 and that of girls from 36 per cent in 1997 to 44 per cent in 2000.

UNICEF supported the installation of 150 "Nafa" centres (second-chance schools), which enrolled 6,000 children, 95 per cent of them girls, and other partners have expressed their commitment to the extension of this innovative approach.

9. UNICEF contributed to the capacity-building of many national NGOs working in the area of protection by providing training and furnishing them with the means to conduct planning, perform activities and evaluate results. The protection programme developed an advocacy component aimed at reviewing the Penal Code and supported legal assistance training for 250 judges, prison governors and social workers to enable policies for children in a custodial setting to be modified. UNICEF played a role in the adoption of the law prohibiting female genital mutilation and in expediting the ratification of the Hague Convention on child adoption, Convention 182 on Worst Forms of Child Labour of the International Labour Organization (ILO) and ILO Recommendation 190 on the same subject. In cooperation with an NGO, Terre des Hommes, a strategy to assist children in conflict with the law is in process of implementation.

10. The problems of children in Guinea have become more visible as a result of active advocacy. In the context of the Global Movement for Children, UNICEF supported the preparation of a framework document entitled "Guinean vision of children in the twenty-first century", which provides guidelines for drawing up sectoral strategies. UNICEF backstopped the establishment of a National Alliance for Guinean Children and of 38 childhood committees at the prefectural level to monitor the implementation of the Convention on the Rights of the Child. Support provided to CPTAFE (National Coordination Cell on Traditional Practices Affecting the Health of Women and Children) for its campaigns aimed at raising awareness about female genital mutilation led to the abandonment of clitoridectomy in a number of prefectures.

Lessons learned from past cooperation

11. The lessons learned from past cooperation remain those described in the country note, to which should be added the lessons learned during the response to the recent humanitarian crisis. The rapidity with which the situation deteriorated revealed the extent to which all the agencies present in Guinea had underestimated the importance of humanitarian risks. By the promptness of its response, however, UNICEF was able to demonstrate how the programmes could adapt effectively to swift changes, and this was appreciated by the Government and the donors.

Recommended programme cooperation, 2002-2006

General resources: 11,966,000 dollars

Other resources: 15,750,000 dollars

Recommended programme cooperation[a]

(In thousands of United States dollars)

	General resources	*Other resources*	*Total*
Child survival	3 115	5 650	8 765
Child development	2 800	4 600	7 400
Protection	1 496	2 000	3 496
Community development/monitoring-evaluation initiatives	1 620	3 500	5 120
Advocacy/communication	1 435	-	1 435
Cross-sectoral costs	1 500	-	1 500
Total	**11 966**	**15 750**	**27 716**

[a] The breakdown of estimated yearly expenditures is provided in table 3.

Country programme preparation process

12. The Government coordinated the preparation of the programme strategy for 2002-2006, with the active participation of the partners, in September 2000. In view of the changes brought about by the crisis now facing the country, the programme content proposed in the country note was revised during the Government/UNICEF review in April, in which the development and humanitarian assistance partners also participated. As a result of the review, it was recommended that an emergency response should be included in the programme structure.

Country programme goals and objectives

13. Pursuant to the two Conventions and bearing in mind the national objectives outlined in the poverty-reduction strategy, the aim of the country programme for 2002-2006 is to contribute to the realization of the rights of women and children, reduce disparities between the sexes and between regions and provide quality humanitarian assistance to refugee and displaced populations. The programme will help: (a) reduce infant and under-five mortality rates from 98 to 70 per 1,000 live births and from 177 to 140 per 1,000 live births and maternal mortality rates from 528 to 350 per 100,000 live births, respectively; (b) improve early childhood development and quality basic education for all; and (c) check the spread of the HIV/AIDS virus and reduce its impact on children, adolescents and women. The programme will enable all children born in Guinea to begin their lives in better circumstances and receive a good basic education and will foster the development of a structure for enhancing the participation and development of adolescents.

Relation to national and international priorities

14. The country programme focuses on the three main components of United Nations development assistance in Guinea, namely, support for pacification, security and development efforts in the subregion; development of a national structure to foster sustainable human development; and improvement of the quality of and access to basic social services. These three components are also included in the Government's national development priorities outlined in the document entitled "Guinea vision 2010" and in the poverty-reduction strategy, which focuses on speeding up economic growth and earning opportunities for the poor; developing and ensuring equitable access to social services; and strengthening human and institutional capacities.

15. The country programme takes into account the outcome of the end-decade review of the goals of the World Summit for Children, the priorities of the strategic medium-term plan and of the Global Movement for Children. It refers to the recommendations made to Guinea by the Committee on the Rights of the Child. It takes into account the impact of the crisis affecting the country, the risks involved in the national and subregional situation, and the strategies of humanitarian agencies operating at the national and regional levels. It sets six strategic priorities: (a) to respond effectively to the crisis and improve efforts to meet the needs of internally displaced persons; (b) to improve the reduction of infant and maternal mortality; (c) to play a leadership role in child development programmes; (d) to deal effectively with the increase in protection problems; (e) to have an impact on community participation; and (f) to reinforce efforts to control HIV/AIDS.

Programme strategy

16. The programme strategies are the same as those described in the country note but they will be implemented on the basis of the following six operating principles: (a) emergency activities will be reinforced, bearing in mind the needs of the populations affected as a result of the worsening crisis and the relocation of most of the refugees to the interior; (b) activities will be implemented over a five-year period, in order to avoid the potentially disruptive effect of displaced populations after the withdrawal of the actors involved in the emergency; (c) for the first two years, priority will be given to emergency interventions; (d) a balance between activities will be maintained, bearing in mind the specific needs of the populations that have been affected by the conflict and those that have not been affected; (e) the programme will be flexible, with scope for adjustments depending on whether the situation worsens or improves, in order to reflect the complexities of the national and subregional crises and to gain the maximum benefit from UNICEF support; and (f) every effort will be made to ensure complementarity with the agencies of the United Nations system in the context of the United Nations Development Assistance Framework (UNDAF), the development partners and the NGOs in terms of planning, targeting of populations and allocation of resources.

17. The country programme will benefit 1,561,000 persons (22 per cent of the population). Actions relating to institutional strengthening, advocacy, immunization and supply of micronutrients will be conducted throughout the entire country, and limited coverage will be provided in a focus area comprised of seven prefectures (Forécariah, Kindia, Kissidougou, Faranah, Kankan, Kouroussa and Dabola) and

20 neighbourhoods in Conakry. The focus area was selected from among the areas that have the greatest influx of displaced persons and refugees and have been identified as the poorest ones on the national poverty map. Five programmes will be implemented: child survival, child development, protection, community development/monitoring-evaluation, and advocacy/communication; the latter two are cross-sectoral in nature. The programmes also provide for emergency humanitarian assistance and include an HIV/AIDS component.

18. **Child survival**. This programme is aimed at: increasing access to quality primary health care; improving the nutritional status of children, adolescents and women; and strengthening the health management capacity of families and communities. It includes three projects which provide for complementary action to be taken in addressing community health issues in partnership with the child development and protection programmes. It will help non-governmental organizations and the national health system provide quality health management for refugee and displaced populations.

19. The access and quality care project will be implemented with the collaboration of the World Health Organization (WHO), the World Bank, the African Development Bank (AfDB), the European Union, the Global Alliance for Vaccines and Immunization and the United Nations Population Fund (UNFPA). The project will boost the performance of the health system by improving management at the district level and focusing on integrated management of affordable quality care, thus making it possible to accelerate the extension of health coverage. At the national level, it will provide support for the Expanded Programme on Immunization (EPI), which will be used as a tool for strengthening the health sector and the efforts to combat malaria and HIV/AIDS. Support to seven health districts in the focus area will include the provision of basic equipment (including obstetric care), training of staff, and assistance with the delivery of health services targeting vulnerable populations that are not reached by existing health structures.

20. The nutrition project is aimed at reducing malnutrition rates and micronutrient deficiencies. In order to reduce the nutritional risks brought about by the present crisis, it will support the extension of community nutrition programmes by fitting out 300 new community-based information systems, supplying micronutrients, training health workers and contributing towards the cost of operating and supervising the services responsible for reducing micronutrient deficiencies and promoting breastfeeding. These actions will be integrated into those carried out by the early childhood development project.

21. The hygiene/water/sanitation project in the focus area will help to improve access to drinking water and sanitation by fitting out modern water points and supporting local mechanisms (management committees) that are responsible for keeping the installed equipment in working order. It will assist in the extension of SanPlat-type hygienic latrines for 100,000 indigenous and displaced persons and will conduct national awareness campaigns in order to encourage the adoption of hygienic behaviour.

22. **Child development**. This programme will contribute to holistic child development. It consists of two complementary projects designed to manage child development according to the life-cycle approach.

23. The early childhood development project, which will receive support from the child survival programme and be conducted in partnership with the World Bank, the World Food Programme (WFP), and NGOs (Enfants réfugiés du monde), will help to design and implement an integrated multisectoral strategy for early childhood development. It will assist the Ministry of Social Affairs and Childhood in developing and implementing this approach and coordinating various sectoral interventions that target young children. UNICEF will support training efforts and provide educational and recreational equipment for prefectural inspection authorities, NGOs and 100 community supervisory centres in 80 communes, villages and refugee camps.

24. The basic education project, in partnership with the World Bank, AfDB, the United Nations Educational, Scientific and Cultural Organization (UNESCO) and WFP, will assist in the development of national policies and strategies designed to improve school enrolment rates and the quality of education. It will provide technical and logistical assistance in connection with the evaluation and adaptation of methods and curricula in the formal and non-formal basic education systems. It will support the introduction of approaches designed to improve attendance and retention and encourage children's participation in learning (child-friendly schools, school canteens, school health, HIV/AIDS prevention, education on children's rights and a culture of peace, parent participation, adjustment of schedules and calendars). In the focus area, the project will provide material support so as to ensure access to quality basic education for 50,000 children and reduce the gender gap by supporting social mobilization campaigns and providing refresher training and equipment for teachers. It will support the establishment of 425 non-formal education centres for children aged between 8 and 18 years and the opening of 200 centres to provide functional literacy for 20,000 women engaged in income-generating activities. It will reinforce support and advocacy actions in order to enable UNICEF to play a primary role in the provision of quality education for refugee children in line with the local agreement memorandum being negotiated with UNHCR.

25. **Protection**. This programme is designed to help improve the living conditions of children and women who need special protection. The level and range of interventions will be enhanced to reflect the fact that needs have increased significantly as a result of the crisis. This programme will be implemented in close coordination with the child development programme.

26. The project to support the development of protection policies and strategies entails carrying out advocacy activities vis-à-vis the Government and civil society with a view to speeding up a review of national legislation on the protection of children's and women's rights in order to bring it in line with the international conventions that Guinea has ratified. It will help set up a data-collection system on children and women who need protection. In collaboration with UNFPA, the project will help the Ministry of Decentralization promote the recording of births in the civil registry. It will provide logistical and methodological support for the various national committees involved in monitoring and protecting children's rights in order to strengthen their prefectural and local units and turn them into effective tools for the application of the conventions.

27. The improvement of access to essential high-quality social services for children and women who need special protection project will facilitate access to social services in the fields of health, education and psychosocial assistance for

20,000 children (in conflict with the law, exploited, living off and in the streets, and affected by armed conflict). It will assist in search efforts and help reunite children with their families and their social and professional environment, in a context of inter-country collaboration. The project will backstop NGOs involved in combating harmful practices, the traffic of children, child labour and early marriage. It will assist in the demobilization, rehabilitation and reintegration of child soldiers and young people who have enlisted in civil defence committees by providing education, socio-vocational training and job opportunities. In partnership with the International Committee of the Red Cross (ICRC), the project will support the training of 30,000 personnel (social workers, security officers, judges, labour inspectors, teachers, staff of NGOs) in the fields covered by the Convention on the Rights of the Child and international humanitarian law, so as to reinforce legal protection for displaced children and women. It will assist the efforts of NGOs in providing psychosocial assistance for displaced and refugee children and women. With regard to the other programmes, it will carry out interventions pertaining to protection against violence and the risk of unwanted pregnancy and HIV/AIDS.

28. **Community development/monitoring-evaluation**. This programme will be the mainstay of the country programme. Thanks to its strategies and its multisectoral nature, it represents the integrating link between the cooperation programme projects, providing methodological support for the empowerment and participation of communities in local development.

29. The community development initiatives support project will help to enhance implementation of the national policy of decentralization and community participation. UNICEF will lend support to the Ministry of Territorial Administration and Decentralization so that the latter may strengthen the technical and logistic capabilities of its prefectural teams and enable them to give guidance to rural development communities and grass-roots communities. The project will support these entities in the organization and management of local development plans. At the national level, this support will further the process of community participation and will also ensure at the level of technical supervision that these local development plans extend to other areas of the country. The project will encourage an increase in the number of income-generating activities both for indigenous populations, and for displaced and refugee populations. As a result of their empowerment, communities will be able to build their capacity to reduce the risks associated with emerging problems, such as the spread of HIV/AIDS and acts of violence. To this end, the project, benefiting as it does from the support of other programmes, will establish a strategic intersectoral plan at the sub-prefectural level to combat HIV/AIDS by integrating the components of health (mother-to-child transmission, management of therapeutic care), education (young people, educational establishments) and participation.

30. The project to monitor and evaluate the programme and the situation of children and women will increase capacity-building in the structures responsible for assessing implementation of the two Conventions. The project will support: (a) the central and decentralized departments of the Ministry of Planning in developing, managing and evaluating social policies and in compiling and processing social statistics; (b) studies and assessments aimed at determining the programme's impact on children and women; and (c) the Ministry of Territorial Administration and Decentralization in coordinating humanitarian aid. It will also monitor the performance of the country programme.

31. **Advocacy/communication**. The object of this programme is to mobilize leaders, the media, children, families, communities, civil society organizations and development agencies in a partnership designed to promote and implement the Conventions and change behaviour in the context of the Global Movement for Children and the "Say yes for children" strategy.

32. The advocacy project will help to promote implementation of the Conventions and mobilize the resources needed for that purpose. It will support the child rights initiatives carried out in this field by 40 partners and 100 community centres by building their communication capacities and providing them with the means to operate. The project will support NGOs concerned with young people with a view to increasing their involvement in planning and implementing programmes of relevance to them. It will document the programme activities and ensure the dissemination of information. It will also implement a strategy to mobilize the other resources needed for implementation of the programme.

33. The programme-support communication project will, on the basis of an integrated communication plan, encourage the adoption of behaviour and attitudes conducive to the survival, development and protection of children and women, particularly in connection with hygiene, HIV/AIDS, school enrolment of girls and female genital mutilation.

34. The country programme will contain **cross-sectoral costs**, which will help to cover staff and operating costs. The funds approved by the Executive Board will be used to finance development and emergency preparedness activities and to resettle displaced persons. Emergency activities will be financed by the proceeds of appeals launched by the office.

Monitoring and evaluation

35. The impact of the programme's activities to improve the situation of children and women will be evaluated through a monitoring process that will look at both the efficacy of the strategies employed and the attainment of programme and project objectives. Thanks to regular updating of the integrated monitoring and evaluation plan, the organization of surveys and field missions by UNICEF staff and their national counterparts, and regular project reviews and assessments, it will be possible to monitor the progress of the projects and the impact of the country programme. Information will be gathered using existing information systems (health, education) and through evaluations and studies. Such data will be collected on a regular basis and broken down by sex, age, region and administrative level. The main indicators used will be: infant, under-five and maternal mortality rates; rate of access to primary health-care services; malnutrition rates; maternal death rate for referred obstetric emergencies; immunization coverage rates; proportion of the population using iodized salt; incidence of HIV/AIDS; crude and net school enrolment rates; number of children reintegrated into the education system; proportion of the population with access to modern water points and high-quality drinking water; proportion of children under the age of 12 who work; and number of children affected by armed conflict and resettled. The evaluations scheduled during the cycle will cover child labour, school enrolment of girls, supervision of young children, community participation and the impact of the crisis on children and women.

Collaboration with partners

36. In order to ensure the most efficient use of resources and the sustainability and replicability of activities, UNICEF has begun to coordinate with its partners with the aim of ensuring complementarity of activities and exchange of experiences. Some correlation between the programme's focus area and the UNDAF joint operational area will enhance complementarity and ensure greater concentration of the resources and comparative advantages of the various agencies. In conjunction with the United Nations Development Programme and the World Bank, the programme will support decentralization and institutional-building. With the World Bank, the United States Agency for International Development (USAID), Coopération française and the German Agency for Technical Cooperation (GTZ), UNICEF will ensure complementarity in the fields of health, basic and non-formal education, early childhood and prevention of HIV/AIDS. With the Agence française de developpement, the partnership will operate in the fields of sanitation and water supply. With non-governmental organizations, it will operate in the field of protection. Partnership ties will also be strengthened with WFP, UNHCR, ICRC and the NGOs (Centre for International Research, Médecins sans frontières) working in the field of humanitarian assistance.

Programme management

37. The modalities for management of the programme will enable any beneficiary involved in its implementation to play a part in identifying needs, drawing up action plans and mobilizing matching resources. At the national level, each sectoral programme will be coordinated by a steering committee with responsibility for drawing up annual action plans, mobilizing resources and monitoring implementation. The steering committees will be coordinated by the Ministry of Cooperation, which will prepare reviews and evaluations in order to determine the degree of consistency between national priorities and the activities performed and the complementarity between such activities and those of the other agencies. In view of the increase in emergency activities, the Kissidougou office, which was established during the crisis, will be maintained and will continue to support implementation of the programme at the local level. The office management team will be established on the basis of the annual management plan to evaluate utilization of the resources mobilized for implementation of the programme.

TABLE 1. BASIC STATISTICS ON CHILDREN AND WOMEN

Guinea	(1999 and earlier years)		UNICEF country classification
Under-five mortality rate	175	(2000)	Very High U5MR
Infant mortality rate	112	(2000)	Very High IMR
GNP per capita	$ 490	(1999)	Low Income
Total population	7.4 million	(1999)	

KEY INDICATORS FOR CHILD SURVIVAL AND DEVELOPMENT		1970	1980	1990	2000
Births	(thousands)	198	243	278	365
Infant deaths (under 1)	(thousands)	39	43	40	41
Under-five deaths	(thousands)	68	73	67	64
Under-five mortality rate (per 1,000 live births)		345	300	240	175
Infant mortality rate (under 1) (per 1,000 live births)		197	175	145	112

		About 1990	Most recent
Underweight children (under 5) (% weight for age, 1991/1999)	Moderate & severe	26*	23
	Severe	9*	5
Babies with low birth weight (%, 1996)		..	13
Primary school children reaching grade 5 (%, 1990/1997)		59	78

NUTRITION INDICATORS	About 1990	Most recent
Exclusive breast-feeding rate (<4 mos.) (%, 1996/1999)	52	12
Timely complementary feeding rate (6-9 mos.) (%, 1999)	..	28
Continued breast-feeding rate (20-23 mos.) (%, 1996/1999)	15	73
Prevalence of wasting (0-59 mos.) (%, 1991/1999)	12*	9
Prevalence of stunting (0-59 mos.) (%, 1991/1999)	32*	26
Vitamin A supplementation coverage (6-59 mons.) (%, 1999)	..	100
Household consuming iodized salt (%, 1999)	..	12

HEALTH INDICATORS		About 1990	Most recent
ORT use rate (%, 1999)		..	40
Routine EPI vaccines financed by government (%, 1999)		..	21
Use of improved drinking water sources (% of population, 1990/2000)	Total	45	48
	Urban/rural	72/36	72/36
Use of improved sanitation facilities (% of population, 1990/2000)	Total	55	58
	Urban/rural	94/41	94/41
Births attended by trained personnel (%, 1992/1999)		31	35
Maternal mortality rate (per 100,000 live births, 1980)		670	..

Immunization		1981	1985	1990	1995	1999
One-year-old (%) immunized against:	Tuberculosis	4	18	50	78	72
	DPT	..	15	17	54	46
	Polio	..	16	18	54	44
	Measles	15	29	35	61	52
Pregnant women (%) immunized against:	Tetanus	5	5	21	65	59

* Aged 3-59 months.

TABLE 1 (continued)

Guinea

EDUCATION INDICATORS		About 1990	Most recent
Primary enrolment ratio (gross/net) (%, 1993/1997-98)	Total	42/37	58/39
	Male	../..	68/49
	Female	../..	40/30
Secondary enrolment ratio (gross/net) (%, 1993/1997)	Total	12/..	14/..
	Male	../..	20/..
	Female	../..	7/..
Adult literacy rate, 15 years & older (%, 1990/2000)	Total	31	41
	Male/female	45/18	55/27
Radio/television sets (per 1,000 population, 1990/1997)		42/ 7	49/12

DEMOGRAPHIC INDICATORS		1970	1980	1990	1999	2000
Total population	(thousands)	3900	4689	6139	8021	8154
Population aged 0-18 years	(thousands)	2013	2426	3194	4092	4145
Population aged 0-5 years	(thousands)	727	897	1107	1427	1448
Urban population (% of total)		13.8	18.2	24.1	29.5	29.9
Life expectancy at birth (years)	Total	37	40	43	47	48
	Male	36	39	43	47	47
	Female	37	40	44	48	48
Total fertility rate		7.0	7.0	6.6	6.1	6.1
Crude birth rate (per 1,000 population)		51	52	45	45	45
Crude death rate (per 1,000 population)		28	25	20	18	18

		About 1990	Most recent
Contraceptive prevalence rate (%, 1992-93/1999)		2.0	6.0
Population annual growth rate (%, 1970-90/1990-99)	Total	1.9	2.7
	Urban	5.0	5.2

ECONOMIC INDICATORS		About 1990	Most recent
GNP per capita annual growth rate (%, 1965-80/1990-99)		1.3	2.0
Inflation rate (%, 1965-80/1990-98)		3	7
Population below $1 a day (%, 1990-99)		..	26
Household income share (%, 1994)	Top 20%/bottom 40%	../..	47/17
Government expenditure (% of total expenditure, 1987)	Health/education	3**/11**	../..
	Defense	29**	..
Household expenditure (% share of total)	Health/education	../..	../..
Official development assistance: (1990/1998)	$US millions	274	359
	As % of GNP	10	10
Debt service (% of goods and services exports, 1990/1997)		17	19

** UNICEF field office source.

TABLE 2. EXPENDITURE UNDER PREVIOUS COOPERATION PERIOD, 1997-2001 a/

COUNTRY: GUINEA
LATEST BOARD APPROVAL: 2000
REGULAR RESOURCES: $ 10,301,000

(In thousands of United States dollars)

Programme sectors/areas	Supplies and equipment (actual)		Training grants (actual)		Project staff (actual)		Other cash (actual)		TOTAL					
									Regular resources b/		Other resources		Total (RR & OR)	
	RR b/	OR	RR b/	OR	RR b/	OR	RR b/	OR	Actual	Planned c/	Actual	Planned d/	Actual	Planned
Health and nutrition	1,126	1,960	49	177	851	359	1,063	1,340	3,089	3,517	3,836	2,615	6,925	6,132
Water and sanitation	633	221	50	55	101	80	433	431	1,217	1,614	787	1,715	2,004	3,329
Basic education for all	119	584	56	115	147	162	274	717	596	1,376	1,610	1,960	2,206	3,336
Communication and advocacy	78	29	1	0	54	0	355	109	488	933	138	735	626	1,668
Support for human development	126	33	22	28	152	0	375	226	675	1,224	287	1,145	962	2,369
Cross-sectoral costs/Programme Support	715	0	2	0	858	0	917	105	2,492	1,637	822	0	3,314	1,637
GRAND TOTAL	2,797	2,827	180	375	2,163	601	3,417	2,928	8,557	10,301	7,480	8,170	16,037	18,471

RR = Regular resources.
OR = Other resources.
a/ = Actual expenditure includes expenditure recorded as at closure 21 May 2001.
b/ = Actual RR expenditure includes allocations from global set-aside.
c/ = Includes $2,701,000 (E/ICEF/2000/P/L.19) for 2001 additional regular resources.
d/ = Includes $134,000 Funded Other Resources.

TABLE 3

GUINEA
PROGRAMME CYCLE: 2002-2006

PLANNED YEARLY EXPENDITURES

DESCRIPTION	FUND	2002	2003	2004	2005	2006	TOTAL
CHILD SURVIVAL	RR	615,000	625,000	625,000	625,000	625,000	3,115,000
	OR	1,098,000	1,188,000	1,188,000	1,088,000	1,088,000	5,650,000
	TOTAL	1,713,000	1,813,000	1,813,000	1,713,000	1,713,000	8,765,000
PROTECTION	RR	300,000	299,000	299,000	299,000	299,000	1,496,000
	OR	400,000	400,000	400,000	400,000	400,000	2,000,000
	TOTAL	700,000	699,000	699,000	699,000	699,000	3,496,000
CHILD DEVELOPMENT	RR	560,000	560,000	560,000	560,000	560,000	2,800,000
	OR	920,000	920,000	920,000	920,000	920,000	4,600,000
	TOTAL	1,480,000	1,480,000	1,480,000	1,480,000	1,480,000	7,400,000
COMMUNITY DEVELOPMENT/ MONITORING-EVALUATION INITIATIVES	RR	300,000	330,000	330,000	330,000	330,000	1,620,000
	OR	700,000	700,000	700,000	700,000	700,000	3,500,000
	TOTAL	1,000,000	1,030,000	1,030,000	1,030,000	1,030,000	5,120,000
ADVOCACY/COMMUNICATION	RR	315,000	280,000	280,000	280,000	280,000	1,435,000
	OR						
	TOTAL	315,000	280,000	280,000	280,000	280,000	1,435,000
CROSS-SECTORAL COSTS	RR	300,000	300,000	300,000	300,000	300,000	1,500,000
	OR						
	TOTAL	300,000	300,000	300,000	300,000	300,000	1,500,000
TOTAL PROGRAMME BUDGET	RR	2,390,000	2,394,000	2,394,000	2,394,000	2,394,000	11,966,000
	OR	3,118,000	3,208,000	3,208,000	3,108,000	3,108,000	15,750,000
	TOTAL	5,508,000	5,602,000	5,602,000	5,502,000	5,502,000	27,716,000
TOTAL SUPPORT BUDGET		949,877	1,022,117	994,080	1,034,452	1,055,426	5,055,952
TOTAL BUDGETS		6,457,877	6,624,117	6,596,080	6,536,452	6,557,426	32,771,952

TABLE 4

LINKAGE OF PROGRAMME BUDGET AND STAFFING/STAFF COSTS

COUNTRY : GUINEA
PROGRAMME : 2002-2006

PROGRAMME SECTION/AREAS AND FUNDING SOURCE	PROGRAMME BUDGET			POSTS a/										STAFF COSTS b/		
	RR	OR	TOTAL	D2/L7	D1/L6	P/L5	P/L4	P/L3	P/L2	IP	NP	GS	TOTAL	IP	LOCAL	TOTAL
REGULAR RESOURCES																
CHILD SURVIVAL	3,115,000		3,115,000	0	0	0	1	0	0	1	1	1	3	790,044	157,569	947,613
PROTECTION	1,496,000		1,496,000	0	0	0	0	0	0	0	1	2	3	0	183,566	183,566
CHILD DEVELOPMENT	2,800,000		2,800,000	0	0	0	1	0	0	1	0	2	3	790,044	67,618	857,662
COMM DEVEL /MONITORING-EVAL INITS	1,620,000		1,620,000	0	0	0	0	0	0	0	2	0	2	0	255,594	255,594
ADVOCACY/COMMUNICATION	1,435,000		1,435,000	0	0	0	0	0	0	0	1	1	2	401,810	141,945	543,755
CROSS-SECTORAL COSTS	1,500,000		1,500,000	0	0	0	0	1	0	1	3	5	9	700,193	468,659	1,168,852
TOTAL RR	11,966,000		11,966,000	0	0	0	2	1	0	3	8	11	22	2,682,091	1,274,951	3,957,042
OTHER RESOURCES																
CHILD SURVIVAL		5,650,000	5,650,000	0	0	0	1	0	0	1	2	6	9	790,044	403,502	1,193,546
PROTECTION		2,000,000	2,000,000	0	0	0	1	0	0	1	1	0	2	790,044	94,309	884,353
CHILD DEVELOPMENT		4,600,000	4,600,000	0	0	0	0	0	0	0	1	0	1	0	115,948	115,948
COMM DEVEL /MONITORING-EVAL INITS		3,500,000	3,500,000	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL OR		15,750,000	15,750,000	0	0	0	2	0	0	2	4	6	12	1,580,088	613,759	2,193,847
TOTAL RR & OR	11,966,000	15,750,000	27,716,000	0	0	0	4	1	0	5	12	17	34	4,262,179	1,888,710	6,150,889
SUPPORT BUDGET	Operating costs		1,983,850	0	0	1	1	1	0	3	3	8	14	2,410,766	661,336	3,072,102
	Staffing			0	0	1	5	2	0	8	15	25	48	6,672,945	2,550,046	9,222,991
GRAND TOTAL (RR + OR + SB)																
	Number of posts and staff costs:															
	Current programme cycle									6	12	23	41			
	At the end of proposed programme cycle (indicative only)									8	15	25	48	6,672,945	2,550,046	9,222,991

a/ Each post, regardless of its funding source, supports the country programme as a whole.
b/ Excludes temporary assistance and overtime.

RR = regular resources.
OR = other resources.
IP = international Professional.
NP = national Professional.
GS = General Service.
SB = support budget